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Bib Data Sheet

CONFIRMATION NO. 6722

SERIAL NUMBER 10/091,079	FILING DATE 03/04/2002 RULE	CLASS 074	GROUP ART UNIT 3682	ATTORNEY DOCKET NO. DP-306451/DE3-0262
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APPLICANTS

Ratko Menjak, Frankenmuth, MI;

** CONTINUING DATA ***** NONE ^{VL}** FOREIGN APPLICATIONS ***** NONE ^{VL}

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 04/06/2002

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MI	SHEETS DRAWING 6	TOTAL CLAIMS 29	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature <u>VL</u> Initials				

ADDRESS

KEITH J. MURPHY
 CANTOR COLBURN LLP
 55 Griffin Road South
 Bloomfield, CT
 06002

TITLE

HAND WHEEL ACTUATOR HAVING STATIONARY HUB

FILING FEE RECEIVED 1202	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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